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244PM 7590 04/29/2011
 Robert D. Shedd, Patent Operations
 THOMSON Licensing LLC
 P.O. Box 5312
 Princeton, NJ 08543-5312

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Joel M. Fogelson	(Depositor's Name)
/Joel M. Fogelson/	(Signature)
June 29, 2011	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/583,594	06/19/2006	Michael Weber	P0030132	9547

TITLE OF INVENTION: METHOD FOR AUTOMATICALLY SETTING UP DATA CONNECTIONS BETWEEN NETWORK SUBSCRIBER STATIONS IN A NETWORK OF DISTRIBUTED STATIONS, AND NETWORK SUBSCRIBER STATIONS AS A USER INTERFACE APPLIANCE FOR CARRYING OUT THIS METHOD

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/29/2011

EXAMINER	ART UNIT	CLASS. SUBCLASS
CHOI, ALBERT T	2471	570-463000

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|---|--|--|
| <p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)</p> <p><input type="checkbox"/> Change of correspondence address (or change of Correspondence Address form PTO/SB412) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB417, Rev. 03/01 or more recent) attached. Use of a Customer Number is required.</p> | <p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents; OR, alternatively,</p> <p>(2) the name of a single firm having as a member a registered attorney or agent and the names of up to 2 registered patent attorneys or agents. If no name is listed, no names will be printed.</p> | <p>1. <u>Robert D. Shedd</u></p> <p>2. <u>Vincent E. Duffy</u></p> <p>3. <u>Joel M. Fogelson</u></p> |
|---|--|--|

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

<p>(A) NAME OF ASSIGNEE</p> <p>Thomson Licensing</p>	<p>(B) RESIDENCE (CITY and STATE OR COUNTRY)</p> <p>Boulogne-Billancourt, France</p>
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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

- | | |
|--|---|
| <p>4a. The following fee(s) are submitted:</p> <p><input checked="" type="checkbox"/> Issue Fee</p> <p><input checked="" type="checkbox"/> Publication fee (No small entity discount permitted)</p> <p><input checked="" type="checkbox"/> Advance Order - # of Copies: <u>3</u></p> | <p>4b. Payment of Fee(s): (Please first reply any previously paid issue fee shown above)</p> <p><input type="checkbox"/> A check is enclosed</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2036 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge the indicated fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 67-0832. (Include an extra copy of this form).</p> |
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5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature <u>Joel M. Fogelson/</u>	Date <u>June 29, 2011</u>
Typed or printed name <u>Joel M. Fogelson</u>	Registration No. <u>43,613</u>

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